TREMPEALEAU COUNTY HEALTH CARE CENTER - IMD

W20298 STATE ROAD 121

WHITEHALL 54773 Phone: (715) 538-4312 Ownership: County Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled - IMD Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? Yes Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/02): Total Licensed Bed Capacity (12/31/02): Title 19 (Medicaid) Certified? 76 No Number of Residents on 12/31/02: 76 Average Daily Census: 74

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02)							
Home Health Care		Primary Diagnosis		Age Groups	%		44.7		
Supp. Home Care-Personal Care	Yes			'		1 - 4 Years	31.6		
Supp. Home Care-Household Services	Yes			Under 65	100.0	•	23.7		
Day Services	Yes	Mental Illness (Org./Psy)	6.6	65 - 74	0.0				
Respite Care	Yes	Mental Illness (Other)	93.4	75 - 84	0.0		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	* * * * * * * * * * * * * * * * * * *	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent			
Congregate Meals No		Cancer	0.0			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)			
Other Meals	Yes	Cardiovascular	0.0	65 & Over	0.0				
Transportation	Yes	Cerebrovascular	0.0			RNs	11.8		
Referral Service	No	Diabetes	0.0	Sex	용	LPNs	5.1		
Other Services	Yes	Respiratory	0.0			Nursing Assistants,			
Provide Day Programming for	I	Other Medical Conditions	0.0	Male	51.3	Aides, & Orderlies	39.3		
Mentally Ill	Yes			Female	48.7				
Provide Day Programming for	I		100.0						
Developmentally Disabled	Yes			I	100.0	I			

## Method of Reimbursement

		edicare itle 18		_	dicaid tle 19			Other		P	rivate Pay	:		amily Care			anaged Care			
Level of Care	No.	Ŷ	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	Ŷ	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	0/0	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	76	100.0	195	0	0.0	0	0	0.0	0	0	0.0	0	76	100.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		0	0.0		76	100.0		0	0.0		0	0.0		0	0.0		76	100.0

TREMPEALEAU COUNTY HEALTH CARE CENTER - IMD

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Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											
Deaths During Reporting Period													
					% Needing		Total						
Percent Admissions from:		Activities of	9	As	sistance of	% Totally	Number of						
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents						
Private Home/With Home Health	0.0	Bathing	71.1		28.9	0.0	76						
Other Nursing Homes	8.2	Dressing	94.7		5.3	0.0	76						
Acute Care Hospitals	51.0	Transferring	98.7		1.3	0.0	76						
Psych. HospMR/DD Facilities	30.6		97.4		2.6	0.0	76						
Rehabilitation Hospitals	0.0	Eating	93.4		5.3	1.3	76						
Other Locations	10.2	* * * * * * * * * * * * * * * * * * *	*****	*****	******	* * * * * * * * * * * * * * * * * * * *	*****						
Total Number of Admissions	49	Continence		용	Special Treatm	ents	8						
Percent Discharges To:		Indwelling Or Extern	nal Catheter	0.0	Receiving Re	spiratory Care	0.0						
Private Home/No Home Health	2.1	Occ/Freq. Incontiner	nt of Bladder	2.6	Receiving Tr	acheostomy Care	0.0						
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	0.0	Receiving Su	ctioning	0.0						
Other Nursing Homes	8.3				Receiving Os	tomy Care	0.0						
Acute Care Hospitals	0.0	Mobility			Receiving Tu	be Feeding	2.6						
Psych. HospMR/DD Facilities	8.3	Physically Restraine	ed	0.0	Receiving Me	chanically Altered Diet	s 1.3						
Rehabilitation Hospitals	2.1	 											
Other Locations	79.2	Skin Care			Other Resident	Characteristics							
Deaths	0.0	With Pressure Sores		0.0	Have Advance	Directives	63.2						
Total Number of Discharges		With Rashes		0.0	Medications								
(Including Deaths)	48				Receiving Ps	ychoactive Drugs	98.7						
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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Ownership:			Size:	Lic	ensure:				
	This	This Government Facility Peer Group		50	-99	Skilled		All			
	Facility			Peer Group		Peer Group		Faci	lities		
	90	%	Ratio	엉	Ratio	엉	Ratio	ଚ	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	97.4	86.3	1.13	83.5	1.17	83.3	1.17	85.1	1.14		
Current Residents from In-County	7.9	75.8	0.10	72.9	0.11	75.8	0.10	76.6	0.10		
Admissions from In-County, Still Residing	2.0	27.1	0.08	22.2	0.09	22.0	0.09	20.3	0.10		
Admissions/Average Daily Census	66.2	96.4	0.69	110.2	0.60	118.1	0.56	133.4	0.50		
Discharges/Average Daily Census	64.9	98.7	0.66	112.5	0.58	120.6	0.54	135.3	0.48		
Discharges To Private Residence/Average Daily Census	1.4	41.6	0.03	44.5	0.03	49.9	0.03	56.6	0.02		
Residents Receiving Skilled Care	100	91.9	1.09	93.5	1.07	93.5	1.07	86.3	1.16		
Residents Aged 65 and Older	0.0	87.8	0.00	93.5	0.00	93.8	0.00	87.7	0.00		
Title 19 (Medicaid) Funded Residents	0.0	67.7	0.00	67.1	0.00	70.5	0.00	67.5	0.00		
Private Pay Funded Residents	0.0	19.7	0.00	21.5	0.00	19.3	0.00	21.0	0.00		
Developmentally Disabled Residents	0.0	0.6	0.00	0.7	0.00	0.7	0.00	7.1	0.00		
Mentally Ill Residents	100	47.5	2.11	39.0	2.57	37.7	2.65	33.3	3.00		
General Medical Service Residents	0.0	15.9	0.00	17.6	0.00	18.1	0.00	20.5	0.00		
Impaired ADL (Mean)	4.7	47.8	0.10	46.9	0.10	47.5	0.10	49.3	0.10		
Psychological Problems	98.7	56.9	1.73	54.6	1.81	52.9	1.86	54.0	1.83		
Nursing Care Required (Mean)	0.5	5.9	0.08	6.8	0.07	6.8	0.07	7.2	0.07		